LISTING OF THE CLAIMS:

This listing of claims will replace all prior versions and listings of claims in the application:

1. (currently amended) A method of detecting a predisposition for developing hypertension and organ damage in an individual, ~~identification and quantification of proteins, isoforms of angiotensin I converting (ACE) in tissues, cells and biological fluids~~ comprising the ~~following~~ steps of:

(a) collecting ~~an~~ a first aliquot of ~~fresh or concentrated~~ biological fluid[[s]], cells or tissues of ~~living organisms~~ the individual;

(b) analyzing and separating the first aliquot into one or more components by Western Blotting ~~and submit them to analysis and separation by a Western Blotting method~~;

(c [[b]]) comparing the ~~sample under analysis~~ first aliquot to a set of ~~the~~ previously established standards for ~~the hypertensive genetic markers and 65 kDa,~~ a plurality of isoforms of angiotensin I converting enzyme (ACE) ~~190~~, wherein the plurality of isoforms of ACE are selected from the group consisting of a 190kDa isoform, a ~~kDa,~~ 90 kDa isoform, and a 65 kDa isoform[[,]] ~~an aliquot of fluid (for example, fresh or concentrated urine) using, as analysis control, ACE isoforms prepared as standards and the ACE recombinant enzyme~~; and

(d [[c]]) detecting a presence of the 190, 90, ~~kDa~~ and 65 kDa isoforms, wherein the presence of the 190, 90, and 65 kDa isoforms are used ~~in normal individuals and also detecting the presence of 90 kDa isoforms that is going~~ to characterize ~~those predisposed persons~~ individuals predisposed for developing hypertension and lesions in characteristic target organs.

2. (currently amended) The [[A]] method according to claim 1, wherein the 90 kDa isoform ~~, which was detected in step (c),~~ is a hypertension genetic marker, ~~and~~ a prognostic agent for hypertension, and a marker for organ damage.

3. (currently amended) The [[A]] method according to claim 1, wherein said analyzing and separating ~~separation of~~ step ~~(a)~~ utilizes a technology selected from the group consisting of a ~~is processed~~ chromatography with a AcA44 resin, ~~and/or~~ a AcA 34 resin, ~~C-18 reverse phase column C-18,~~ a mass spectrometer using a C-18 reverse phase column C-18, and a Western Blotting, wherein the Western Blotting uses ~~using~~ a specific antibody against somatic ACE isoform of 190kDa and against N-domain ACEs ~~[90 kDa and 65 kDa] of 190 kDa, 90 kDa~~ isoforms of 90kDa and 65 kDa ~~isoforms~~.

4. (currently amended) The [[A]] method according to claim 1, wherein the biological fluid is urine.

5. (currently amended) The [[A]] method according to claim [[2]] 3, further comprising detecting ~~wherein it is detected in urine of normotensive individuals,~~ two peaks corresponding with angiotensin I converting enzyme activity ~~with~~ of 190 kDa and 65 kDa molecular weights in urine of normotensive individuals.

6. (currently amended) The [[A]] method according to claim 5, wherein the detecting step comprises ion exchange chromatography ~~is used~~.

7. (currently amended) The [[A]] method according to claim 4, wherein the urine ~~it is detected~~ in a hypertensive individual has a profile that shows ~~urine a profile where it was eluted~~ two peaks

with angiotensin I converting enzyme activity with 90 kDa and 65 kDa molecular weights, wherein there is no detection of a ~~not being detected the 170~~ 190 kDa isomer form.

8. (currently amended) A method of detecting a predisposition for developing hypertension and organ damage in an individual wherein the identification of ~~the~~ a ~~potential of~~ 90 ~~KDA~~ kDa isoform of angiotensin I converting enzyme comprises ~~comprising~~ the ~~following~~ steps of:

(a) concentrating and dialyzing dialyzed urine with Tris-HCl 50 mM buffer, pH 8.0 and submitting the dialyzed urine ~~it~~ to a gel filtration in an AcA-34 column equilibrated with Tris-HCl 50 mM buffer, containing NaCl 150 mM, pH 8.0;

(b) collecting fractions of 2 mL ~~from the fractions~~ and monitoring the fractions ~~them~~ through absorbance measurements at A280 nm and by the ~~converting activity of~~ angiotensin I converting enzyme activity, and using Hipuril-L-His-L-Leu-and Z-Phe-His-Leu as ~~subtracts~~ substrates; and

(c) observing ~~the~~ a presence of isoforms with ACE activity with a profile selected from the group consisting of: (~~170~~ 190 kDa and 65 kDa isoforms; ~~) (n=21), from isoforms~~ (~~170~~ 190 kDa, 90 kDa and 65 kDa isoforms; and ~~) with (n=13) as well as (~~90 kDa and 65 kDa~~) (n=13)~~ isoforms.

9. (currently amended) The [[A]] method according to claim 8, wherein the profile with ~~two isoforms with ACE activity (170~~ 190 kDa and 65 kDa isoforms, ~~) (n=21)~~ detected in the step (c), are from normotensive individuals with normotensive parents.

10. (currently amended) The [[A]] method according to claim 8, wherein the profile with ~~three isoforms (170~~ 190 kDa, 90 kDa and 65

kDa isoforms, ~~) (n=13)~~ detected in step (c), come from normotensive individuals with hypertensive parents.

11. (currently amended) The [[A]] method according to claim 8, wherein the profile with ~~two isoforms~~ ~~(~~90 kDa and 65 kDa isoforms, ~~) (n=13)~~ detected in step (c), come from hypertensive individuals with hypertensive parents.

12. (currently amended) The [[A]] method according to claim 8, wherein the 90 kDa isoform is a hypertension genetic marker, ~~and~~ a prognostic agent for hypertension, and a marker for organ damage.

13. (currently amended) A hypertension genetic molecular marker based on said genetic proteins obtained according to claim 1, wherein the hypertension genetic molecular marker ~~it~~ is the basis of the 90 kDa isoform.

14. (currently amended) The method according ~~to Use of genetic marker obtained according to~~ claim 2 [[1]], wherein the hypertension genetic marker ~~it~~ is used as a prognostic agent of hypertension.

15. (currently amended) The method according to claim 2, ~~Use of genetic marker obtained according to claim 1,~~ wherein the hypertensive genetic marker ~~it~~ is used in the diagnosis of the predisposition for the development of hypertension and lesions in characteristic target organs.

16. (currently amended) The method according ~~Use according~~ to claim 15, wherein the characteristic target organs are the heart, nervous system, vascular system and kidney.

17. through 19. (cancelled)

20. (currently amended) A kit for diagnosis of arterial hypertension, ~~further~~ comprising ~~the~~ the hypertensive genetic marker obtained according to claim 1.

21. (currently amended) The [[A]] kit according to claim 20, ~~for diagnosis~~ further comprising ~~a genetic marker and~~ a prognostic agent of hypertension.

22. (currently amended) The [[A]] kit according to claim 20 ~~16~~, wherein said kit is used in ~~diagnosis,~~ risk stratification and therapeutical decisions for ~~in the~~ arterial hypertension.

23. (new) The method according to claim 1, wherein said method is used for diagnosis, risk stratification and therapeutical decision in regard of arterial hypertension and renal lesion.

24. (new) The method according to claim 23, wherein the 190 kDa and 65 kDa isoforms are present in biological fluids of normotensive individuals and the 90 kDa isoform is also present in biological fluids of predisposed individuals.

25. (new) The method according to claim 23, wherein a presence of the 90 kDa isoform in biological fluids indicates predisposition to a development of hypertension and lesions in characteristic target organs.

26. (new) The method according to claim 23, wherein the 90 kDa isoform is the hypertensive genetic marker of hypertension and a prognostic agent of hypertension.